PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effective December 8, 2004 | | | | | | | | | 10/59/153 | | | |
|--|--|---|--|------------------------------------|------------|---------------------------------------|-----|---------------------|------------------------|----|---------------------|--|
| | | CLAIMS A | - AS FILED - | | | (Column 2) | | SMALL ENTITY TYPE | | OR | OTHER THA | |
| U.S. NATIONAL STAGE FEES | | | | | | <u> </u> | 7 | RATE | FEE | 7 | RATE | FEE |
| BASIC FEE | | | SMALL ENT. | = \$ 150 | LAR | GE ENT. = \$ 300 | 1. | BASIC FEE | | OR | BASIC FEE | 2/1 |
| EXAMINATION FEE | | | (4) = \$50/\$100 | | | ther situations = | 1 | EXAM. FEE | | 1 | EXAM. FEE | DM |
| SEARCH FEE | | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | | other situations = \$ 250 / \$ 500 | 1 | SEARCH FEE | | 1 | SEARCH FEE | 117 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | | X \$ 125 = | | 1 | X \$ 250 = | 1 |
| TOTAL CHARGEABLE CLAIMS | | | | | * | | | X \$ 25 = | | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | | inus 3 = | ٠ | | 1 | X \$ 100 = | | OR | X \$ 200 = | |
| _ | | DENT CLAIM PR | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | olumn 2 | • ' | TOTAL | | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL E | NTITY | OR | OTHER SMALL E | |
| AMENDMENT A | 8/39/06 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUME PREVIO PAID F | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | ' _ | Minus | 11/ | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | | | Minus / Land | | | =/ | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | _ | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. | |
| | | (Column 1) | | (Colum | ın 2) | (Column 3) | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIOU PAID F | ER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | | Minus | *** | | 3 | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRES | ENTATION OF M | ULTIPLE DEPE | NDENT C | LAIM | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". If the "Highest Number Previously Paid For" in THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |